Course title: Psychiatry

Course Description:- This course introduced to the 5th class

Undergraduate Thi-Qar medical college student to clarify the

Theoretical rules and clinical practice of Psychiatry. The course

Involve the skills of history taking, mental state examination,

Dynamic, behavioral, cognitive interpretation of each disorder

Trusting the formulation of cross-sectional history practicing

General appearance, body language, thought process and

Thought content disorder, Perceptual, cognitive, Judgment

Disorder should be well explained and discussed in simple technique

To make student more familiar with these new skills.

Course Duration: 60 hours of theory and 20 hours of practice per week.

Course General Objectives:

By the end of this course, students should be able to:

1- How to follow the steps of mental state examination

To take a history and general mental assessment

- 2- Definition of signs and symptoms according to psychopathology
- $\mbox{\ensuremath{\mbox{3-}}}\mbox{\ensuremath{\mbox{understanding}}}\mbox{\ensuremath{\mbox{the}}}\mbox{\ensuremath{\mbox{abnormal}}}\mbox{\ensuremath{\mbox{the}}}\mbox{\ensuremath{\mbox{chept}}}\mbox{\ensuremath{\mbox{$

Like delusion, hallucination, speech and mood disorders.

- 4-interpretation of psychodynamic Explanation of each presentation through Various theory
- 5-Reviewing all psychiatric disorders, regarding their definition, epidemiology, etiology, severity Therapeutic approach like different Psychotherapeutic techniques and physical treatment, such as drug

Therapy electroconvulsive (ECT) therapy and modern psycho surgical operation for various mental disorder

6-learning the clinical course, prognosis differential diagnosis of each disorder

Course Specific Objectives:

Explained for each lecture give to students.

Intended Learning Outcomes (ILOs):

Upon completion of this course, students will be able to:

- Knows and understand the basic principles of practice of medicine
- The ability to acquire a detailed medical history(accurate,organized,and problemfocused)--- Skill
- The ability to perform an accurate general physical examination of the patient appropriate for age,gender,and mental and physical health status of the patient in a thorough, sensitive and systematic manner.

After taking history the student should be able to present it in form of oral presentation and present the findings of general examination in a systematic way. This include chronologically organized development of the present illness, medication lists. Past history, and pertinent positives and negatives from family, social, drug histories.

Mentioned for each lecture being given for students

Intended learning outcome (ILOs):-

At ending of this course, student will be able to:

- 1- Know the basic principle of psychiatry
- 2- Have the ability to gain detailed psychiatric Interview and history (accurate, systemized and problem target skill)
- 3- The ability to perform accurate mental state examination of patient, with appropriate identity information like (age, gender, Job, martial state, social class, occupational position....)

In addition to mental and physical health of patient and focusing on oddities in behaviours, general appearance,

Speech thoroughly in sensitive and well oriented teaching diagnosis or differential diagnoses

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Teaching strategy (overview):

- .objective-based learning
- .Student-Centered learning
- .Active student participation
- .Make student more familiar with new technical term

And odd behavioural.

Teaching and Learning Methods:

The course will use the following teaching and learning methods:

- Theory sessions :
- Theory sessions:-
- -Lecture knowledge acquisition
- -Group discussion-critical thinking (abstracted and conclusive)

• Practical sessions:

-Site visit – observation: skill development And attitude formation attending the psychiatric unit, making history through mental state Examination, face to face with patient to reveal Signs and symptoms

Case Presentation: psychiatric Knowledge acquisition, skills Development, and attitude formation

Group discussion:- Knowledge acquisition, skill development, through presenting a case through the participation of group in presence of psychiatrist to gain a new skill and illuminate the oddities and disorganization of the case

• Students feedback (course evaluation form)

Which is form a of MSE (Mental State Examination)

Course Online:-

No course online

.Blueprint :- 5th year Thi-Qar, medical college include

1- Thirty hours lectures: - 2hrs/week

Including the following topics

.After presenting the case for student and sharing them to detect the signs and symptoms

According to theoretical lecture and practical presentation, the way of correlating each symptoms to gather to form final diagnosis,

Severity and duration of each disorder should be

Consider in diagnosis, chronological progression of disorder is essential special childhood, adolescent and the development stages of life

.Lastly formulation of case

Presentation, life trauma, family, history, Socio-Occupational problem dynamic, behavioural, cognitive approaches, history of drug use or abuse, all these presentation all should be analyzed to reach final

(Psychiatric Course Blueprint – 5th year)

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				Assessment M Summative				Formative			Total Weight
Week No.	Lecture Name	lecturer	ILO		Practical	logbook	Course activities - quizzes and teaching file	Quiz	Group	Project homework	(impact X frequency)
1	Mental state examination	Dr. Hussein Hlail	K:1,K5,K6,K10,K13,K15 S1,S3,S4,S6,S8,S9,S13,S17,S2 0,S23 AB1,AB2,AB3,AB6	X				X			16
2	Defense Mechanisms	Dr.Hussein Hlail	K1,K4,K5,K7,K8,K14 S1,S3,S4,S5,S6,S8,S9,S13,S17, S18 AB2,AB3,AB4,AB10,AB12	X				X			20
3	Childhood Disorder	Dr.Hussein Hlail	K2,K6,K8,K13,K14 S1,S3,S5,S6,S8,S9,S11,S18 AB4,AB8,AB12	X			X	X	X		28
4	Depressive Bipolar related disorder	Dr.Hussein Hlail	K1,K4,K5,K6,K8,K10,K11,K1 2,K14,K16,K19,K22 S1,S3,S4,S6,S8,S9,S10,S12,S1 8 AB1,AB2,AB5,AB6,AB12	X			X	X	X	X	28
5	Schizophrenia And other Psychotic disorders	Dr.Hussein Hlail	K1,K2,K6,K8,K10,K11,K12,K 14,K16,K19,K22 S1-S4,S6-S9,S13,S17,S20 AB1-AB5,AB7,AB10-AB12	X			X	X	X	X	28
6	Anxiety disorder	Dr.Hussein Hlail	K1,K2,K5,K6,K18,K10- K16,K22 S1-S10,S16,S20-S22 AB3,AB4,AB11,AB12	X			X	X	X	X	28
7	Somatic symptom & related disorder	Dr.Hussein Hlail	K1,K2,K5,K6,K18,K10- K16,K22 S1-S10,S15-S17 AB1,AB4,AB11,AB12	X			X	X	X	X	28
8	Neurocognitiv e disorder	Dr.Hussein Hlail	K1,K2,K3,K10,K12,K13- K17,K20,K22 S1-S10-S11,S15,S16 AB1,AB2,AB4,AB6,AB10,AB 12	X			X	X	X	X	15

9	Dissociative Disorder	Dr.Hussein Hlail	K1,K4,K5,K6,K8,K10-K12 K13-K17,K22 S1-S10,S16-S17,S22-S24 AB1-AB5	X			X	X	X		29
10	Impulse control disorder	Dr.Hussein Hlail	K1,K5,K13-K16,K22 S1-S10,S11-S14,S16-S18,S21- S24 AB1,AB2,AB4,,AB7,AB10,AB 12	X			X	X	X	X	19
11	Eating Disorder	Dr.Hussein Hlail	K1,K2,K6,KK10,K13- 16,K21,K22 S1-10,S11-13,S15-20 AB3,AB4,AB5,AB6,AB7	X			X	X	X	X	19
12	Personality Disorder	Dr.Hussein Hlail	K1,K5,K8,K10,K11,K12,K13- 16,K17 S1-10,S11,S13,S17,S24 AB1,AB2,AB5,AB6,AB7,AB1 0,AB12	X			X	X	X	X	19
13	Normal sleep And sleep disorder	Dr.Hussein Hlail	K2,K5,K8,K13,K14,K15,K18, K21 S1-10,S12,S13,S17,S24 AB3,AB4,AB5,AB6	X			X	X	X	X	16
14	Human Sexuality	Dr.Hussein Hlail	K1,K2,K10,K11,K12,K13-17 S1-S4,S6-9,S11,S17,S22,S23 AB1-AB7,AB6-AB8	X			X	X	X	X	16
15	Psychopharma cology	Dr.Hussein Hlail	K8,K9,K12,K17,K21 S5,S7,S10,S20 AB7,AB8,AB10,AB11	X			X	X	X	X	14
16	Suicide	Dr.Hussein Hlail	K4,K6,K8,K10-K12,K13- 17,K20,K22 S1-10,S12,S17,S16,S17 AB1-AB5,A8,A11-12	X		X	X	X	X		21
17	Psychothrapie s	Dr.Hussein Hlail	K6,K8,K11,K13-17 S8,S9,S10,S13,S17,S20 AB1-A5,A8,A11-12	X		X	X	X	X	X	19
18	Epidemiology	Dr.Hussein Hlail	K5,K10,K14.K15 S3,S6 AB1,2,3,7,11-12	X		X	X	X	X	X	19
19	Ethics	Dr.Hussein Hlail	K6,K14,K15,K17 S7,S8,S9,S12,S17,S20 AB1-5,AB6-8,AB10,AB12	X		X	X	X	X		17
20	Interpretation Of Medical Literature	Dr.Hussein Hlail	K1,K5,K10,K14,K15,K17 S3,S5,S7,S9,S13,S14,S19,S23, S24 AB1-5,AB6-5,AB-R	X	X	X	X	X	X		14
21	Bereavement	Dr.Hussein Hlail	K1,K4,K5,K8,K11,K12,K13- K16 S1,S3-S10,S11-S13,S16- S20,S23 AB1,2,6,7,12	X	X	X	X	X	X	X	20
22	Disorder of Stream of Thoughts	Dr.Hussein Hlail	K1,K5,K8,K13,K14,K15 S3,S6-9,13,17,18,24 AB4,8,12	X	X	X	X	X	X		20
23	Lect.1 Signs of symptoms	Dr.Hussein Hlail	K1,K5,K6,K8,K13-K16 S1,3,4,6-9,13,17,18,23,24 AB4-AB8,AB12	X	X	X	X	X	X		16
24	Mental Retardation	Dr.Hussein Hlail	K1-K5,K10,K12,K12-15 S1-S10,S11-S14,S15-S17,S21-	X	X	X	X	X	X	X	20

			S23								
			AB1-5,AB7,8,AB10-12								
25	Psychiatric Aspect of Obstetrical Gynaecology	Dr, Hussein Hlail	K1,K5,K8,K11,K13-17,K22 S1-9,S12-S15,S17-18,S22-S24 AB1,2,3,4,5,8,10	X	X	X	X	X	X		25
26	PTSD	Dr,Hussein Hlail	K1,K3,K5,K11,K12,K14,K15, K16 S1-S10,S12-14,S16-S18 AB1-4,7,8 AB6-12			X	X	X	X		22
27	Substance Related Disorder	Dr,Hussein Hlail	K1,K5,K8- K10,K11,K12,K14,K15,K17,K 21,K22 S1-10,S13,S15,S16-S18 AB1-5,AB7-8,AB10-12			X	X	X	X	X	22
28	Substance- abuse-pptx (Amph)	Dr.Hussein Hlail	K1,K5,K8,K9,K10,K11,K12,K 14,K17,K21,K23 S1-10,S13-15 AB1-5,A7,AB8,AB10,AB12	X		X	X	X	X	X	22
29	The abuse Of Alcohol	Dr. Hussein Hlail	K5,K8,K12,K14-17,K21,K22 S1-S10,S13,S15,S16-S18,S21- 24 AB1-AB5,AB7-AB8,AB10-12	X		X	X	X	X	X	14
30	Child Abuse	Dr.Hussein Hlail	K2,K5,K10-K12,K13-K17 S1-10,S11-17 AB1	X		X		X	X		12
31	Adjustment Disorder	Dr,Hussein Hlail	K1,K5,K6,K8,k14- k16,K17,K18,K19 S1,S3,S6,S8,S9,S12,S13 AB1,AB2,AB10-12	X							20
32	Bio statistic	Dr.Hussein Hlail	K1,5,10,14,15 AB4,4,5 A7,8,A11-12	X		X	X	X			12
33	Clinical applications of patient safety	Dr.Hussien Hlail	K1,K6,K7,K12,K17,K18,K20, K21,K22 S1,S3,S4,S5,S6,S7,S8,S9,S12,S 14,S15-18 AB1,2,5 AB6,7,8 AB11,12	X							16
34	Popular health management	Dr.Hussein Hlail	K3,K5-12,K18,K21 S1-S9,S12-S18,S22-24 AB1-2 AB5-8 AB11,AB1	X					X		18
35	Specific learning disorder	Dr.Hussein Hlail	K1,K2,K5,K11-K15 S1,S3,S6,S8-10-13,S16-17 AB1,AB4,A5,A6,7,8,12	X			X	X			12
36	Structural Changes of Brain addict	Dr.Hussein Hlail	K1,K2,K5,K7,K14,K15,K17,K 21 S1,S2,S3,S14,S6-10,S13- 17,S21,S24 AB4,5	X							20
37	Dr-Pt Relationship	Dr.Hussein Hlail	K11,K14,K15,K16,K17 S1,3,6,7-9,17,18 AB8,AB11-12	X				X			25
38	Communicati on skills	Dr.Hussein Hlail	K11,12,14,15,16,17 S1,3,6,7-9,17,18 AB1-8,AB11-12	X					X		24

39	Psycho Sociology	Dr.Hussein Hlail	K1,K6,K11,K12,K14,K15,K16, K20 S1,3,6,7,8,12,13,21-24 AB1,2,3,6-8,10-12	X					22
40	Cognitive behavioural therapy	Dr.Hussein Hlail	K1,K6,K8,11,17 S5,15,17,18,23 AB1,2,3,4,7,8,11,12	X	X	X	X		20

II) Sixty hours practical sessions: 12 small groups: 2Hrs/days for each group/12 weeks:

Course evaluation form:

The educational objectives were also used to develop a course evaluation form. The form fourteen chapters in which students are asked to rate general course characteristics, accomplishment of the general objectives, and usefulness of several learning activities. In addition, students are asked to write comments and suggestions for improvement.

These three formal student evaluations provide documentation on student achievement on almost all of the objectives. Examples from each section are shown in the table below.

TABLE: COURSE EVALUATION FORM (students feedback)

A- Course analysis

	Very strongly Disagree	Strongly disagree	Disagree	Agree	Strongly agree	Very strongly agree
In general: 1-The course objectives were well defined. 2- the course was well organized. 3- the lectures were informative. 4- I saw an adequate number and variety of clinical cases	1 1 1	2 2 2 2	3 3 3 3	4 4 4 4	5 5 5 5	6 6 6
As a result of this course: 5- I have reach a through approach of physical signs 6- I can incorporate a physical and clinical findings into a differential diagnosis.	1	2	3	4	5 5	6 6

B-Please indicate how help each of the followings in your learning

	Did not attend	Not at all helpful	Minimally helpful	Reasonably helpful	Very helpful	Maximally helpful
1-Lectures 2CLINICAL SESSIONS 3-Group discussion.	0	1 1	2 2	3 3	4 4	5 5
	0	1	2	3	4	5

Analysis of results: method to analyze data collected using a Likert scale

- 1. Assign numerical values to each response option on the scale. For example, you could assign 1 to "strongly disagree," 2 to "disagree," 3 to "neutral," 4 to "agree," and 5 to "strongly agree."
- 2. Calculate the mean score for each statement by summing the numerical values for all responses to that statement and dividing by the number of respondents. This will give you an average score for each statement.
- 3. Interpret the results by considering the mean scores for each statement.

 Statements with higher mean scores are more positively rated by respondents, while statements with lower mean scores are less positively rated.

Summary:

This approach has allowed the clerkship to be flexible enough to accommodate varying student abilities and interests while also assuring coverage of core concepts and materials.

Conclusion:

The above curriculum design provides a comprehensive framework for teaching and assessing internal medicine in an undergraduate medical college. The course includes a balanced mix of theoretical and practical sessions, and the teaching methods and assessment methods. The ILOs, general objectives, and specific objectives are well-defined, which will enable students to achieve a thorough understanding of principles of practice of psychiatry and mental assessment.

Requirements to completely achieve instructional objective for psychiatry in our college:

- Psychiatry is a wide specialty deals with all medical branches & should not be included with surgical department but as a separate department dealing with all other departments. Specially neurology, Community, medicine
- 2. The college should encourage a monthly department conference activities . Students should attend all these interdepartmental conferences

Assessment Methods:

The course will use the following assessment methods:

1. Summative:

- Written exams (short essay questions ,long essay , SBA, MCQ, Cross match): to assess the students' knowledge and understanding of the theory.
- Quizzes which are graded & involving different topics.

2. Formative assessment:

- Quizzes in class after most topics- which are not graded
- Group discussion in class

Grading and Evaluation:

The grading system for the course will be as follows:

Commutative:

- Written midyear exam = 20%
- Practical exam = 20 %
- written final exam = 60 %
- Total 100 %
- Pass mark = 50%
- Textbooks approved:
 - 1- Kaplan Medical USMLE step 2

Lecture notes 2021

2- Shorter oxford text book of psychiatry (Seventeenth edition)

<u>Formative</u> (no mark given – just take feedback)

- Group discussion.
- Some of the quizzes without mark

Lecturers:

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C.I.B.M.S (PSY)